

NHPUC 29JUN'16PM12:01

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NH Public Utilities Commission

REC Aggregator Portal

New Users [CLICK HERE](#) to setup your account for this form. Creating an account enables you to partially complete the form and return later to finish it or to make changes after the form is submitted. Be sure to create your account BEFORE entering information into the form, or the information will be lost.

Existing Users [CLICK HERE](#)**Basic Information**

Aggregator Batch Number

Aggregator name

Facility Owner Name

Facility Address

Facility Town/City

Facility State

Facility Zip

Mailing Zip

Primary Contact

Karen Tenneson

Facility Information

Class

II

Utility

Liberty

Other Utility Name

To obtain a GIS ID contact:

James Webb

408 517 2174

jwebb@apx.com

GIS ID (include "NON")

NON85369

Date of Initial Operation

06/09/2016

Facility Operator Name, if applicable

Panel Make #1

LG

Panel Model

Other

Panel Quantity

24

Panel Rated Output

315

Other panel make

Other panel model

More Panel types?

- ☒ No
☐ Yes

Panel Make #2

Panel Model

Panel Quantity

Panel Rated Output

More Panel types?

- ☒ No
☐ Yes

Panel Make #3

Panel Model

Panel Quantity

Panel Rated Output

System capacity based on panels

Inverter Make

Other inverter make

Inverter Quantity

1

Add'l Inverter Quantity

NA

Additional Inverter Make

None

Rated Output - Primary Inverter

7700

Rated Output - Additional Inverter

System capacity based on single inverter make

7700

System capacity based on two inverter types

System capacity in kW as stated on the interconnection agreement

7.0

Revenue Grade Meter Make

Revenue Grade GIS Approved Meter

GE

Other revenue-grade GIS-approved meter

Was this facility installed directly by the customer (no electrician involved)?

- ☐ Yes
☒ No

Electrician Name & Number

E.E. Houghton 0241C

Other Electrician Name & Number

Installation Company

Solar Dave LLC

Other Installation Company Name

Other Inst. Company Address

Other Inst. Company City

Other Inst. Company State

Other Inst. Company Zip

Equipment Vendor Company Name

Independent Monitor Name & Company

Paul Button - Energy Audits Unlimited

Other Monitor Name and Company

Is the installer also the equipment supplier?

- ☒ Yes
☐ No

Equipment Vendor

Please attach your completed interconnection agreement including Exhibit B.

https://fs30.formsite.com/jan1947/files/f-5-99-7075616_WYVdz4p6_Miller_COC.pdf

The project described in this application will meet the metering requirements of PUC 2506 including:

Electricity generation in megawatt hours shall be reported to the GIS quarterly with a statement that the submission is accurate by the owner of the source, the independent monitor or a designated representative.

A revenue quality meter (meeting ANSI C-12.1-2008 for installations up to and including 10 kW, or ANSI C12.16 or better for installations greater than 10kW up to 1 mW) is used to measure the electricity generated.

The facility owner has certified to the independent monitor that the meter operates according to manufacturing standards.

The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

Please attach additional document here

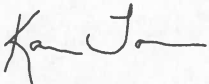
https://fs30.formsite.com/jan1947/files/f-5-168-7075616_UxFVajY0_Miller_NHOS.pdf

Please attach additional document here

https://fs30.formsite.com/jan1947/files/f-5-173-7075616_bT7SWE5X_Miller_SPIA.pdf

Aggregator statement of accuracy

Sign your name using a mouse or, if you are using a touch-screen device, a stylus or other pointer.



Print Name

Karen Tonnesen

Date Signed

06/23/2016

Exhibit B - Certificate of Completion for Simplified Process Interconnections

Installation Information:

☐ Check if owner-installed

Customer or Company Name (print): <u>Christopher Miller</u>		Contact Person, if Company:	
Mailing Address: <u>51 Ramsay Hill Road</u>			
City: <u>Walpole</u>	State: <u>NH</u>	Zip Code: <u>03608</u>	E-Mail Address: <u>cmiller@chamberlainmachine.com</u>
Telephone (Daytime): <u>756-2560</u>	(Evening): <u>381-1526</u>	Facsimile Number:	
Address of Facility (if different from above):			
City:	State:	Zip Code:	
Generation Vendor: <u>Solar Dave LLC</u>		Contact Person: <u>David Wirth</u>	

I hereby certify that the system hardware is in compliance with Pub 900.

Vendor Signature: David Wirth Date: 6/9/2015

Electrical Contractor's Name (if appropriate): <u>E.E. Houghton Co Inc</u>		License number: <u>02411</u>	
Mailing Address: <u>PO Box 387</u>			
City: <u>Walpole</u>	State: <u>NH</u>	Zip Code: <u>03608</u>	E-Mail Address: <u>info@eehoughton.com</u>
Telephone (Daytime): <u>603 756 3372</u>	(Evening): <u>603 756 3372</u>	Facsimile Number: <u>603 756 9998</u>	

Date of approval to install Facility granted by the Company: 5/12/2016 Installation Date: 6/9/2016
Application ID number: 2016-28

Inspection:

The system has been installed and inspected in compliance with the local Building/Electrical Code of

Walpole / Cheshire
(City/County)

Signed (Local Electrical Wiring Inspector, or attach signed electrical inspection): [Signature]

Name (printed): Steve Grier Date: 6/9/16

Dated: July 03, 2012
Effective: July 03, 2012

Issued by: /s/ Victor D. Del Vecchio
Victor D. Del Vecchio
Title: President

New Hampshire PUC REC Certification Application Owner Statements

The information provided on this application for New Hampshire Renewable Energy Certificate eligibility is accurate to the best of my knowledge and I authorize Knollwood Energy to act on my behalf in filing said application.

The project described in this application will meet the metering requirements of PUC 2506 including:

Electricity generation in megawatt hours shall be reported to the GIS quarterly with a statement that the submission is accurate by the owner of the source, the independent monitor, or a designated representative.

A revenue quality meter is used to measure the electricity generated.

The facility owner has certified to the independent monitor that the meter operates according to manufacturing standards.

The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

Christopher Miller

Printed Name of signature owner

Christopher Miller

Christopher Miller (Jun 21, 2016)

Signature of system owner

Simplified Process Interconnection Application and Service Agreement

Contact Information:

Date Prepared: 5-9-16

Legal Name and Address of Interconnecting Customer (or, Company name, if appropriate):

Customer or Company Name (print): CHENICHER MILLER Contact Person, if Company: _____

Mailing Address: 51 RAMSAY HILL RD

City: WALPOLE State: NH Zip Code: 03608 E-Mail: CMILLER@CHAMBERLAIN
Telephone (Daytime): 603-756-2560 (Evening): 603-581-1526 Facsimile Number: MACHINE COPY

Alternative Contact Information (c.g., system installation contractor or coordinating company, if appropriate):

Name: Solar Dave LLC
Mailing Address: 414 Safford Road
City: Westmoreland State: NH Zip Code: 03467 E-Mail: soldavee@gmail.com
Telephone (Daytime): 603-83-8671 (Evening): _____ Facsimile Number: _____

Electrical Contractor Contact Information (if appropriate):

Name: EE Ploughton Telephone: 756-3372
Mailing Address: P.O. Box 387
City: Walpole State: NH Zip Code: 03608

Facility Information:

Address of Facility: 51 RAMSAY HILL RD.
City: WALPOLE State: NH Zip Code: 03608
Electric Supply Co: LIBERTY UTILITIES Acct #: 44619892-44-295233 Meter #: E-90616468
Gen/Inverter Manu: SMA Model Name and #: SB7000 TL Quantity: 1
Nameplate Rating: 7 (kW) _____ (kVA) 240 (AC Volts) Single ☒ or Three _____
Phase _____
System Design Capacity: 7 (kW) _____ (kVA) Battery Backup: Yes: _____ No: ☒
Net Metering: If Renewably Fueled, will the account be Net Metered? Yes: ☒ No: _____
Prime Mover: Photovoltaic ☒ Recip'g Engine ☐ Fuel Cell ☐ Turbine ☐ Other: _____
Energy Source: Solar ☒ Wind ☐ Hydro ☐ Diesel ☐ Nat Gas ☐ Fuel Oil ☐ Other: _____
UL 1741.1 (IEEE 1547.1) Listed? Yes: ☒ No: _____ External Manual Disconnect: Yes: ☒ No: _____
Estimated Install Date: 6/10/2016 Estimated In-Service Date: 6/11/2016

Interconnecting Customer Signature

I hereby certify that, to the best of my knowledge, all of the information provided in this application is true and I agree to the Terms and Conditions on the following page:

Customer Signature: C. Miller Title: _____ Date: 5-9-16

Please attach any documentation provided by the inverter manufacturer describing the inverter's UL 1741 listing.

Approval to Install Facility (For Company use only): Installation of the Facility is approved contingent upon the terms and conditions of this Agreement, and agreement to any system modifications, if required.

Are system modifications required? Yes: _____ No: ☒ To be Determined _____

Company Signature: RAR Title: ENGINEERING Date: 5/12/16
Company waives inspection/Witness Test? Yes: ☒ No: _____

Application Number 2016-28

Dated: May 4, 2015
Effective: July 15, 2014

Issued by /s/ Richard Leehr
Richard Leehr
Title: President